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|                                   | Attorney I                 | Docket Number OPT-003            |  |  |
|-----------------------------------|----------------------------|----------------------------------|--|--|
| DECLARATION FOR UTILITY OR DESIGN |                            | ed Inventor Stephen B. Krasulick |  |  |
| PATENT APPLICATION                | ON .                       | COMPLETE IF KNOWN                |  |  |
| (37 CFR 1.63)                     |                            | n Number Unassigned              |  |  |
| Declaration Declaration           | Filing Date                | e December 4, 2001               |  |  |
| Submitted OR Submitt              | ed after Initial Group Art | Unit Unassigned                  |  |  |
|                                   | R 1.16 (e))                | Name Unassigned                  |  |  |

| -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |                                     | _                       |                                 |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------|-------------------------|---------------------------------|--|--|
| As a below named inventor, I hereby declare that:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |                                     |                         |                                 |  |  |
| My residence, mailing address, an                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | d citizenship are as stat | ed below next to my nam             | ne.                     |                                 |  |  |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:                                                                                                                                                                                                                                                                                                                               |                           |                                     |                         |                                 |  |  |
| Electro-Absorption Modulated Laser with High Operating Temperature Tolerance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           |                                     |                         |                                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (Title of t               | he Invention)                       |                         |                                 |  |  |
| the specification of which                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                           |                                     |                         |                                 |  |  |
| is attached hereto                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |                                     |                         |                                 |  |  |
| or was filed on (MM/DD/YYYY) as United States Application Number or PCT International                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |                                     |                         |                                 |  |  |
| Application Number Unass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | igned and was a           | amended on (MM/DD/YY                | YY)                     | (if applicable).                |  |  |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.                                                                                                                                                                                                                                                                                                                                                                                                             |                           |                                     |                         |                                 |  |  |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-<br>in-part applications, material information which became available between the filing date of the prior application and the national or<br>PCT international filing date of the continuation-in-part application.                                                                                                                                                                                                                                         |                           |                                     |                         |                                 |  |  |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. |                           |                                     |                         |                                 |  |  |
| Prior Foreign Application Number(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Country                   | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed | Certified Copy Attached? YES NO |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           |                                     |                         |                                 |  |  |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           |                                     |                         |                                 |  |  |

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## **DECLARATION** — Utility or Design Patent Application

| Direct all correspondence to:   Customer Nu or Bar Code l                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |             |       | OR C                | forrespondence address below |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------|-------|---------------------|------------------------------|
| Xurt Rauschenbach Name PATENT TRADEMARK OFFICE                                                                                                                                                                                                                                                                                                                                                                                                                            |                 |             |       |                     |                              |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |             |       |                     |                              |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |             | State | 9                   | ZIP                          |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Telep           | phone       |       |                     | Fax                          |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the walldity of the application or any patent issued thereon. |                 |             |       |                     |                              |
| A petition has been filed for this unsigned inventor                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |             |       |                     |                              |
| Given Name Stephen B. [first and middle [if any])                                                                                                                                                                                                                                                                                                                                                                                                                         | - I aminy reame |             |       | Krasulick           |                              |
| inventor's Steel M ()                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |             |       |                     | Date /2-3-0/                 |
| Fogelsville                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 | PA<br>State |       | Country             | US<br>Citizenship            |
| 2136 Apple Road                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |             |       |                     |                              |
| Fogelsville Clty                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 | PA<br>State |       | 18051<br><b>ZIP</b> | US                           |
| NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor                                                                                                                                                                                                                                                                                                                                                                                            |                 |             |       |                     |                              |
| Given Name Terence D. (first and middle [if any])                                                                                                                                                                                                                                                                                                                                                                                                                         |                 |             |       | iy Name<br>ırname   | Grenda                       |
| Inventor's Signature    Can be                                                                                                                                                                                                                                                                                                                                                                                                                                            |                 |             |       |                     | Date 12-3-01                 |
| Perkasie Residence: City                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 | PA<br>State |       | US<br>Country       | US<br>Citizenship            |
| 483 Longleaf Drive Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |             |       |                     |                              |
| Perkasie<br>City                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 | PA<br>State |       | 18944<br><b>ZIP</b> | US<br>Country                |
| Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.                                                                                                                                                                                                                                                                                                                                                      |                 |             |       |                     |                              |

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## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page \_1\_ of \_1\_

|                                                                                                                 |          |   |            |                  | 45.1           |  |  |
|-----------------------------------------------------------------------------------------------------------------|----------|---|------------|------------------|----------------|--|--|
| Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor                |          |   |            |                  |                |  |  |
| Given Name (first and middle [if any])                                                                          |          |   | Family N   | ame or St        | urname         |  |  |
| Paul Kit Lai                                                                                                    |          |   | Yu         |                  |                |  |  |
| Inventor's Signature Dan Wat                                                                                    |          |   |            | 11/03/01<br>Date |                |  |  |
| Residence: City San Diego                                                                                       | State CA |   | Country US |                  | Citizenship US |  |  |
| 4455 Rosecliff Place<br>Mailing Address                                                                         |          |   |            |                  |                |  |  |
| Mailing Address                                                                                                 |          |   |            |                  |                |  |  |
| City San Diego                                                                                                  | State CA | A | ZIP 92130  | Countr           | y US           |  |  |
| Name of Additional Joint Inventor, if any:                                                                      |          |   |            |                  |                |  |  |
| Given Name (first and middle [if any]) Family Name or Sumame                                                    |          |   |            |                  | umame          |  |  |
|                                                                                                                 |          |   |            |                  |                |  |  |
| Inventor's Signature Date                                                                                       |          |   |            |                  |                |  |  |
| Residence: City                                                                                                 | State    |   | Country    |                  | Citizenship    |  |  |
| Mailing Address                                                                                                 |          |   |            |                  |                |  |  |
| Mailing Address                                                                                                 |          |   |            |                  |                |  |  |
|                                                                                                                 |          |   |            |                  |                |  |  |
| City State ZIP Country                                                                                          |          |   |            |                  |                |  |  |
| Name of Additional Joint Inventor, if any:                 A petition has been filed for this unsigned inventor |          |   |            |                  |                |  |  |
| Given Name (first and middle [if any]) Family Name or Surn                                                      |          |   | or Surname |                  |                |  |  |
|                                                                                                                 |          |   |            |                  |                |  |  |
| Inventor's Signature Date                                                                                       |          |   |            |                  | Date           |  |  |
| Residence: City                                                                                                 | State    |   | Country    |                  | Citizenship    |  |  |
| Mailing Address                                                                                                 |          |   |            |                  |                |  |  |
| Mailing Address                                                                                                 |          |   |            |                  |                |  |  |
| City                                                                                                            | State    |   | 710        | Co               | untor          |  |  |

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